

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006160

FILED
Feb 27, 2016
Secretary of State
CC9771992217

Entity Name: THE HENRY NEHRLING SOCIETY, INC.

Current Principal Place of Business:

2267 HEMPEL AVENUE
BOX 884
GOTHA, FL 34734

Current Mailing Address:

PO BOX 884
GOTHA, FL 34734

FEI Number: 59-3617338

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DECKER, NANCY PHD
789 NIGHT OWL LANE
WINTER SPRINGS, FL 32708 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name WITHERS, ANGELA
Address 712 MAIN STREET
City-State-Zip: WINDERMERE FL 34786

Title VPD2
Name VOLZ, DAVID
Address 140 MILEHAM DRIVE
City-State-Zip: ORLANDO FL 32835

Title FINANCIAL SECRETARY
Name LAKE, PERNILLE
Address 1244 BELFIORE WAY
City-State-Zip: WINDERMERE FL 34786

Title TREASURER
Name GAUGER, GISELLE
Address 9690 CAMBERLY CIRCLE
City-State-Zip: ORLANDO FL 32836

Title VPD1/GRANT WRITER
Name SCHRETMANN-MYERS, THERESA
Address 2713 TRYON PLACE
City-State-Zip: WINDERMERE FL 34786

Title CORRESPONDING SECRETARY
Name RALPH, JILL
Address 4915 KENSINGTON PARK BLVD.
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name NEFF, MIKE
Address P.O. BOX 165
2037 HEMPEL AVENUE
City-State-Zip: GOTHA FL 34734

Title RECORDING SECRETARY
Name SWANTON, ART
Address P.O. BOX 444
City-State-Zip: MOUNT DORA FL 32756

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THERESA A. SCHRETMANN-MYERS

1ST VICE PRESIDENT

02/27/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HARBIN , DENISE
Address 6130 HUCKLEBERRY AVENUE
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name BURTTTRAM, JODY
Address 1734 MAPLE LEAF DRIVE
City-State-Zip: WINDERMERE FL 34786

Title DIRECTOR
Name JOHNSON , CAROL A.
Address 16605 SANDHILL ROAD
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR
Name NEHRLING , RICHARD
Address 437 SOUTH LAKEWOOD RUN DRIVE
City-State-Zip: PONTE VEDRA BEACH FL 32082